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## DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN **APPLICATION DATA SHEET (37 CFR 1.76)**

Title of Invention MAIL RECEPTACLE
As the below named inventor(s), I/we declare that:
This declaration is directed to:
The attached application, or
Application No, filed on,
as amended on(if applicable);
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;
I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.
FULL NAME OF INVENTOR(S)
Inventor one: BRENT STAFNARO
Signature: But Guy Citizen of: U.S.A.
Inventor two:
Signature: Citizen of:
Inventor three:
Signature: Citizen of:
Inventor four:
Signature: Citizen of:
Additional inventors are being named on additional form(s) attached hereto.

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

## **DECLARATION** — Utility or Design Patent Application

Direct all correspondence to: Customer Number or Bar Code Label		OR Con	respondence address below
Name BRENT STAGNARO			
Address 5893 FIRST ST	T. SOUTH	4	
city ARLINGton	State	VA	zip 72704
Country U.S.A Telep	phone 703-3	79-5720	Fax
I hereby declare that all statements made herein of my own are believed to be true; and further that these statements made are punishable by fine or imprisonment, or both, undivalidity of the application or any patent issued thereon.	were made with the kn	nowledge that willful false	statements and the like so
NAME OF SOLE OR FIRST INVENTOR:	A petition has bee	en filed for this unsign	ed inventor
Given Name (first and middle [if any]) BRENT JOSO	PH Family or Su	y Name STA6~	ARO
Inventor's Bent J. My	200		Date 6-23-03
Residence: City ARLing to	State VA	Country USA	Citizenship ()SA
Mailing Address 5 f 9 3 FINST ST	t. South	,	
	State VA	ZIP ZZZOY	Country USA
NAME OF SECOND INVENTOR:	A petition has been	filed for this unsigned	d inventor
Given Name (first and middle [if any])	Family or Sun		
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
	State	ziP entor(s) sheet(s) PTO/SB/0	Country

PTO/SB/01 (10-01)

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**DECLARATION FOR UTILITY OR** 

**DESIGN** 

**Attorney Docket Number** 

**First Named Inventor** 

PATENT APPL	ICATION	COMPL	ETE IF KNOWN		
(37 CFR 1	.63)	Application Number		/	
	Destantia	Filing Date			ŀ
Declaration L.Submitted OR with Initial	Declaration Submitted after Initial Filing (surcharge	Art Unit			
Filing	(37 CFR 1.16 (e)) required)	Examiner Name			J
As the below named inventor, I her	eby declare that:			- 1	
My residence, mailing address, and co	itizenship are as stated belo	w next to my name.			
I believe I am the original and first inve	-			•	
BRENT STAGA	ARO, 5893	FIRST ST.	SOUTH ,	ARLington	7
BRENT STAGN VA ZZZO4 - U	NITED STAT	ES OF AMIN	ica		
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+					
T. T. J. T. W.	1		<u> </u>		
TITLE OF INVER	Title of the Ir	L KECEP	TACLE		┚┃
the specification of which	(The of the m	vonusin,			
is attached hereto					
OR _					
was filed on (MM/DD/YYYY)		as United States A	pplication Number	or PCT International	
Application Number	and was amende	ed on (MM/DD/YYYY)		(if applicable).	
Application Number	and was amende			(ii applicable).	l
I hereby state that I have reviewed and any amendment specifically referred to		f the above identified specif	fication, including t	he claims, as amended by	y
I acknowledge the duty to disclose info applications, material information whic international filing date of the continua	h became available betweer	patentability as defined in the filing date of the prior	37 CFR 1.56, incluance application and the	uding for continuation-in-pa e national or PCT	art
I hereby claim foreign priority benefits breeder's rights certificate(s), or 365(s States of America, listed below and h breeder's rights certificate(s), or any claimed.	<ul> <li>a) of any PCT international ave also identified below, b</li> </ul>	application which designate v checking the box, any for	ted at least one correign application f	ountry other than the Unit for patent, inventor's or pla	ited lant
Prior Foreign Application	C	Foreign Filing Date	Priority	Certified Copy Attache	:d?
Number(s)	Country	(MM/DD/YYYY)	Not Claimed	YES NO	
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			님		
Additional foreign application nur		mental priority data sheet F	PTO/SB/02B attack	ned hereto:	

Please type a plus sign (+) inside this box  Under the Paperwork Reduction Act of 1995, no persons an	e required to resp	U.S. Patent and 1	rademark Office; U.	PTO/SB/02A (11-00) ough 10/31/2002. OMB 0651-0032 S. DEPARTMENT OF COMMERCE ontains a valid OMB control number.
DECLARATION			ADDITION	NAL INVENTOR(S) emental Sheet je of
Name of Additional Joint Inventor, if an	y:	A petition ha	as been filed for th	is unsigned inventor
Given Name (first and middle [if any])		F	amily Name or Su	ımame
Inventor's Signature	><			Date
Residence: City	State	Country		Citizenship
Mailing Address				
Mailing Address				
City	State	ZIP	Country	,
Nam of Additional Joint Inventor, if an	y:	☐ A petition has	s been filed for this	s unsigned inventor
Given Name ∢(irst and middle [if any])		F	amily Name or Su	ımame
Inventor's Signature				Date
Residence: City	State	Country		Citizenship
Mailing Address				
Mailing Address				
Mailing Apparess			$\overline{T}$	
City	State	ZIP	Cour	ntry
Name of Additional Joint Inventor, if an	y:	A petition has	been filed for this	unsigned inventor
Given Name (first and middle [if any])			Family Name o	Surname
Inventor's Signature	$\leq$			Date
Residence: City	State	Sountry		Citizenship
Mailing Address				

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Country

State

Mailing Address

Please type a plus s	gn (+) inside this box	<b>→</b> □
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## **DECLARATION** — Supplemental Priority Data Sheet

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Cop	y Attached? NO
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